

CLAIMS ONLY						Application Number <i>10/697568</i>	Filing Date
						Applicant(s)	
						• May be used for additional claims or amendments	
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		
	Indep	Depend	Indep	Depend	Indep	Depend	
1	/		/		/		51
2	/		/		/		52
3	<i>2</i>		/		/		53
4	<i>3</i>		/		/		54
5	<i>4</i>		/		/		55
6	<i>4</i>		/		/		56
7	<i>4</i>		/		/		57
8	<i>4</i>		/		/		58
9	<i>4</i>		/		/		59
10	<i>4</i>		/		/		60
11	/		/		/		61
12	/		/		/		62
13	/		/		/		63
14	<i>5</i>		/		/		64
15	<i>6</i>		<i>8</i>		/		65
16					/		66
17					/		67
18					/		68
19					/		69
20					/		70
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42							92
43							93
44							94
45							95
46							96
47							97
48							98
49							99
50							100
Total Indep	<i>3</i>		<i>3</i>		<i>3</i>		Total Indep
Total Depend	<i>52</i>		<i>71</i>		<i>12</i>		Total Depend
Total Claims	<i>52</i>		<i>74</i>		<i>30</i>		Total Claims